

Navigating Uncertainty: Best Practices in Disaster Behavioral Health Podcast

Season 1: Diversity, Equity, Inclusion, and Accessibility (DEIA) in Disaster Behavioral Health

Episode 2: Preparedness—Transcript

Narrator: Welcome to *Navigating Uncertainty: Best Practices in Disaster Behavioral Health* from the Substance Abuse and Mental Health Services Administration Disaster Technical Assistance Center, also known as SAMHSA DTAC. This podcast covers disaster behavioral health, or mental health and substance use-related issues and where they intersect with disaster preparedness, response, and recovery. In our first season we'll explore diversity, equity, inclusion, and accessibility in disaster behavioral health.

Please note that the views, information, and opinions expressed in this podcast are those of the speakers and do not necessarily reflect or represent the views and opinions of SAMHSA. We've worked in this podcast to bring together a range of expert voices. We will cover many complex topics that always benefit from more and different voices. We invite you to share your questions and feedback with our team so we can keep making this podcast better and continue promoting nationwide disaster resilience and information sharing.

Xani Podolny: Welcome to *Navigating Uncertainty: Best Practices in Disaster Behavioral Health*. I'm your host, Xani Podolny, Deputy Director of SAMHSA's Disaster Technical Assistance Center. In this episode, we'll again be exploring diversity, equity, inclusion, and accessibility in disaster behavioral health, focusing on the preparedness phase of the emergency management lifecycle. We'll discuss the importance of incorporating DEIA principles into planning for disaster survivors, how to bring more voices to the table and involve them in the planning process, and how to engage in truly inclusive disaster behavioral health and disaster planning.

Today we're very lucky to be joined by Curtis Brown. Mr. Brown is an experienced homeland security and emergency management executive, educator, and disaster equity thought leader. His experience includes developing innovative policies and programs, building partnerships, driving innovation, enhancing team performance, and managing complex organizations. His diverse emergency management and homeland security work experiences include key roles on the federal, state, and local levels.

Curtis currently serves as Visiting Senior Practitioner in Residence in the L. Douglas Wilder School of Government and Public Affairs at Virginia Commonwealth University. He supports the work of the Research Institute for Social Equity and teaches courses within [the] Homeland Security and Emergency Preparedness program. He previously served as the State Coordinator of Emergency Management at the Virginia Department of Emergency

Management. Curtis is the Co-founder of the Institute for Diversity and Inclusion in Emergency Management, a nonprofit organization dedicated to promoting diversity and implementing equitable practices to build community resilience. Curtis, welcome and thank you so much for joining me today.

Curtis Brown: Thank you. I'm really glad to be on and have an opportunity to discuss this really important topic.

Podolny: Excellent. We're thrilled to be having this conversation with you. And as we dive in, I wanted to get us started talking about how traditional emergency management planning processes might not address the modern DEIA needs. So, to start us off, could you tell us a little about the importance of including DEIA in disaster planning and how we can ensure that disaster preparedness planning is inclusive of diverse communities and addresses their unique needs?

Brown: Great question. Because inclusive planning is really important to ensure that we in government in particular are meeting the unique needs of our diverse communities. When you look at the history of emergency management here domestically in the United States, there's one consistent theme, and one that has been seen over time in the 20th century, even here into the 21st century, is that the individuals and communities that suffer the most are our communities of color, our marginalized and underserved communities, our people with disabilities.

They account for the most fatalities, injuries, economic loss, and inability to recover. And it's really because of this lack of inclusive planning on the front end during what we call blue sky days, where we're not really engaging with the community. We're planning not inclusively. We're in our offices, considering what we believe the needs of the community are, instead of finding out what the community needs are and leveraging our trusted community-based organizations, who are very much connected to the community needs.

And so, if we're going to change this trend, especially as we face more frequent and impactful disasters, we're really going to have to change the way in which we go about planning, and that's by leveraging the expertise of the community, who are on the front line of these disaster impacts.

Podolny: Thank you so much for giving those great examples and really laying it out clearly that there are real-life consequences to not being inclusive in our planning, and that those consequences are more focused on those marginalized populations. So it really brings home the need to change our strategies to modernize how we approach the planning process. And you've already touched on that, working with trusted community partners. So, could you dive into that a little deeper and talk a little bit about how we can engage those traditionally marginalized communities in the disaster planning process and the strategies that we can tap into to ensure that their voices are truly heard?

Brown: Yes. In terms of engaging the community, government has to be willing to be innovative and do nontraditional outreach outside of our normal Monday through Friday, 9 to 5 schedule. We have to recognize that individuals in our community have key responsibilities with their family, taking care of their family, potentially multiple jobs. And so government has to be democratized to go to the community and meet the community where they are.

I think we've often spoken about communities that lack adequate access to healthy and nutritious food. We call them food deserts. In many cases, these communities are deserts to a host of government services. And so how can we reinvent how we do business in government to really meet the needs of marginalized and underserved communities? We need to go to the community.

One of the examples that we did during our efforts to vaccinate our high-risk communities, especially in communities of color and underserved communities in our rural areas in Virginia during our vaccination campaign, is that we had members of the community go door to door and provide educational material and information on vaccination events that were going on right there in the community. And we partnered with community-based organizations and small businesses to host vaccination events. We brought these assets and tools and much-needed vaccine to the community.

And you also saw a host of other government innovation during COVID, even with other government services like the Department of Motor Vehicles taking their services mobile into the community. These are the types of innovations that I think is really important to demonstrate that we have an inclusive government, that we're meeting the needs of everyone, especially those who are underserved and at the front line of disaster impacts and risk.

I've also seen innovation across the country where people are equitably paid to give their time to provide input on disaster planning and hazard mitigation plans. Again, this is the reality that individuals' times are valuable, that their input is needed, and so why don't we equitably provide some funding, childcare, other things of that sort to get their input and also to recognize the need to be equitable in terms of finances, given the fact that many of these communities are low income.

So those are just a couple of strategies, but government really needs to be willing to be innovative, and go against our traditional 9 to 5, Monday through Friday way in which we conduct business.

Podolny: Yes, I totally agree, and I love this discussion about being innovative in how we can meet the community where they're at, and in that way address their needs in a more responsive way. I was wondering if you could also tell us a little bit about cultural and linguistic factors and some of the challenges that that might present when trying to reach marginalized or traditionally underserved communities and some ideas or strategies for how to address them.

Brown: We have so many diverse communities across the country, and it's really important that we recognize and respect these unique cultural and linguistic factors as we engage these communities. One of the ways in which I think is a really good strategy in doing so is by partnering with trusted community-based organizations that individuals in the community rely on for services and support so we can best understand what the needs are and how to best communicate and coordinate support.

A mentor of mine used to be the Emergency Manager in Los Angeles, which, of course, is one of our most diverse cities in our nation. And he talked about partnering with different racial and ethnic groups to figure out in a sheltering scenario what would be the best food to provide for that community. Because of cultural and religious differences, some foods would not be needed or used. And so that demonstrates the type of outreach needed and the collaboration required to make sure that we're providing what is needed for the community that has been impacted.

Last year, I'm a little off in terms of the day, I believe a year ago, or 2 years ago actually at this point, in Virginia we supported the Afghans at risk who were coming over to the United States at the end of the war in Afghanistan. And we had to support providing shelter and food for a temporary period of time as they were being sheltered at Dulles Airport before moving on to being officially placed in a home.

And we were very intentional in terms of supporting . . . coordinating with the Afghan community in Northern Virginia, who understood the culture and the linguistic factors that were needed to be understood as we hosted these Afghans at risk who were definitely coming over during a very stressful period of time.

So that type of coordination and many of these community-based groups and organizations, they are looking for opportunities to support. They are definitely trusted and engaged in the community and government just has to be willing to build a bridge and maintain a consistent, ongoing relationship with these community-based organizations. And as I mentioned earlier, equitably support them through funding. A lot of times government thinks we have to do everything ourselves. We can provide funding and grants to these community-based organizations and partner with them to better meet the needs of the community than government doing it ourselves.

Podolny: Those were some really excellent examples. Appreciate you illustrating these concepts so clearly. We're talking about folks who have survived disasters. So, at a baseline, they have experienced trauma. Now, if we're thinking about the response and how it serves them, if it isn't really serving them or is serving them food they can't or aren't comfortable eating, if the sheltering is not culturally appropriate, if they can't communicate with the individuals trying to help them, what does that do to the trauma they've already been through? So, it really becomes clear how critical it is to plan for these things and ensure that the response is not adding to the discomfort and difficulty that the survivors are enduring.

So, I think the discussion about innovation is fantastic and I was wondering if we could talk a little bit more about funding and what the pressing needs are for funding in DEIA and if you have any suggestions, thoughts, or ideas on how to best get access and utilize funding?

Brown: Great question. You know the interesting thing about funding is when a disaster occurs, funding becomes available, a large amount of funding for response and recovery comes available from the federal government, multiple agencies. Funding becomes available because of disaster declaration, and when we look at long-term recovery for some of these large-scale disasters, billions of dollars are provided for recovery. You also see, in terms of philanthropy, a large amount of funding becomes available with individuals giving funds through the American Red Cross and other trusted organizations.

What I believe we need to really do is look at how we can place more of that funding in the front-end preparedness and mitigation prior to these disasters occurring. We already know that we're dealing with more frequent and impactful disasters because of climate change. And we've seen it here in recent years, numerous billion-dollar events, very localized flooding events that aren't even associated with a tropical storm or hurricane.

A few months ago saw that in Fort Lauderdale, Florida, you know, 30 inches of rain in a small period of time. And we've also seen major tornadoes in Mississippi and other parts of the Southeast. And of course, a large amount of snow and rain and flooding in California over this year as well.

And so this is going to continue, based on the projections from scientists. And so since we know this, and since we know that marginalized and underserved communities are at the front line of disaster impacts because of a legacy of discriminatory practices and limited resources, why don't we place some of this funding, both through government and philanthropy, on the front end of preparing these communities, providing resources for building resilience for renters and homeowners, for individuals in these low-income communities? Let's creatively use mitigation funding to deal with the type of hazards that we know we're going to have to deal with: more flooding, heat, heat hazards, and other things of that sort.

And so I think of COVID-19 just because it's been such an impactful disaster that we had to deal with for such a long period of time. What if we could have gotten on the front end of that and really dedicated more resources on the front end, especially to our frontline workers who are members of our marginalized and underserved communities? We probably could have seen a way to mitigate the loss of life and the negative impacts that we saw during COVID-19. And so part of the innovation is how do we move our funds from the back end to the front end and hopefully mitigate the negative impacts that we consistently see during disasters on marginalized and underserved communities.

Podolny: Yeah, thank you. I agree that a shift in the funding strategies would be beneficial. Those who are experienced in emergency management have said for many years that

planning is really the keystone. If there's no funding for effective planning, it puts the success and completeness of the response at risk, and I think you've really elaborated on exactly how we could potentially have better planning through different funding mechanisms.

And related to our discussion on innovation here, there's a lot of technology changing rapidly, all the time, and I was wondering if you had thoughts on how we can tap into some of these new technologies or utilize them in new ways such that they can assist in our DEIA goals in disaster behavioral health preparedness, response, and recovery.

Brown: Technology offers a lot of potential benefits to integrating diversity, equity, inclusion, and accessibility into disaster behavioral health and emergency management through all phases. And we've seen this very successfully done, especially as it relates to accessibility, the innovation to ensure that people with disabilities are able to be included in each phase of emergency management, are able to be provided with information, even if they have an access or functional need.

And so, we should continue to leverage that technology to assure that individuals who are blind or hard of seeing are able to access information, or deaf or hard of hearing are able to access information. We should also use this technology to support language access to make sure that our information is accurately translated into the diverse languages that our communities have.

But it's also important to note that technology cannot be used independently. I mentioned language access, for instance. There's a number of tools that can translate information from one language another language, but it's really important to have an individual who is well versed in the cultural norms and linguistic norms of the population that is trying to be served to ensure that the translation is accurate and that we're giving out accurate information. That has been one of the failures of relying solely on technology in the past.

We also have to recognize that as innovation occurs, such as artificial intelligence, that the research has found that there are biases that can be built into artificial intelligence. So how can we be mindful of that and be intentional in terms of making sure that this technology is inclusive, is understand the unique needs of our diverse communities. So there has to be some oversight and there has to be some intentionality in terms of equitably distributing technology directly to our marginalized and underserved communities.

As another example of COVID-19, we saw a lot of our schools that were temporarily closed, and students had to learn virtually. Well, the inequity was found in the lack of technology in terms of laptop as well as broadband available in some communities. And so, we cannot just instinctively move to technology without considering how to ensure that we're equitable, ensure that the individuals who are in our marginalized and underserved communities actually have the resources needed to leverage the benefits of technology. So I see a lot of benefits, but I think we have to be very mindful of some of the barriers of access and be

intentional in terms of integrating equity into our distribution of technology to communities to support disaster response recovery and mitigation preparedness.

Podolny: Yeah, those are excellent points. And I think with all things technology, you know, it's not necessarily a turnkey solution. There's nuances and things that need to be considered through the lens of equity before you can just let loose a technology and think that it might solve your problems. So I think there's a lot of potential there, but as you said, a need for close examination and mindfulness when we are utilizing technologies.

And you mentioned technology specifically in relation to folks with disabilities and other access and functional needs. And I was wondering if you could elaborate a little bit on how can we better involve individuals with disabilities and other access and functional needs in the disaster preparedness process and what are some of the unique challenges that they face?

Brown: People with disabilities and access and functional needs best understand what their needs are. And similar to, as we've discussed already, we need to be willing to go directly to them and ask them what their needs are and initiate the planning process with them participating. A key phrase that's been adopted is "nothing for us without us" and that message is still accurate and still needs to get through to many of us who are involved in emergency management. We need to fully integrate people with disabilities into our emergency planning.

Some of the challenges that have been seen is the lack of understanding how to truly meet the needs of people with disabilities throughout the disaster response and recovery process. I was at a meeting not too long ago, and the director of FEMA's Office of Disability Integration talked about the work of their office and how he went to a disaster recovery center recently and saw that there was a lack of accessibility, for instance, to the restroom facility and other things that were needed to be done that only he, as a person with a disability in a wheelchair, could best articulate.

And I thought that was a great example of how the lived experience is really important. And that is why we need to have diverse organizations that are representative of people with disabilities and also ensure that our community-based organizations and advocacy groups and individuals with disabilities are represented from steps A through Z throughout the whole process, and especially at the beginning. If we do this, we can avoid these negative disaster impacts that again we see all too often.

The data indicates that people with disabilities are more likely to die during disasters. And of course, sadly, we've seen this, especially in 2017 with the many wildfires we had out west. And so, we can directly change those negative statistics and create a new performance measure that demonstrates that no matter what your physical ability, you are going to be included in our disaster plans, that your life matters, and we're going to do it through integrating the expertise of people with disabilities into the emergency planning process.

Podolny: Thank you for those great examples and really bringing us back to an important core theme of this discussion, which is community involvement and tapping into the communities themselves to better understand them, and therefore, to better serve them. And nothing for us without us, I think, is a great motto for these planning processes because it really gets down to the heart of what we're trying to do. So, thank you so much for the excellent discussion. Before we wrap up, is there anything additional you would like to share or comment on?

Brown: Xani, thank you so much for the opportunity to participate in the podcast and the discussion. I just really believe that this is one of our most important issues in the 21st century: How can we equitably respond to more frequent impactful disasters that we know are going to disproportionately impact our historically marginalized and underserved communities, including communities of color, low-income communities, and rural and urban areas and people with disabilities, is really going to impact us in terms of behavioral health, both the disaster survivors in these communities, as well as those of us who are involved in emergency management planning.

And so, we have to consider how we can innovate, how we can try to address the disproportionate impacts of these disasters by leveraging key concepts of diversity, equity, and inclusion, and accessibility. By doing so, I believe that we can minimize the loss of life and injury and economic loss and truly build resilience in these communities and hopefully share best practices all across the country and all across the world and be able to move forward in an equitable fashion. So, thank you very much for the conversation and the work that's being done to highlight this issue.

Podolny: Thank you so much, Curtis. Fantastic discussion. Really appreciate your time and you sharing your expertise and your personal stories, which really gave some great context to these ideas. So, thank you again for joining us. And thank you all for listening. Please join us next time on *Navigating Uncertainty: Best Practices in Disaster Behavioral Health*.

Narrator: Thank you for listening to this episode of *Navigating Uncertainty: Best Practices in Disaster Behavioral Health*. If you enjoyed this episode, please consider subscribing on Apple Podcasts, Spotify, or Google Podcasts. You might also like to explore other SAMHSA DTAC products on our website at www.samhsa.gov/dtac.

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